

MOTION FOR CONTINUANCEJD-CV-21 Rev. 2-13
C.G.S. § 52-196
P.B. § 14-23, 14-24STATE OF CONNECTICUT
SUPERIOR COURT
*www.jud.ct.gov*COURT USE ONLY
MFCSE**Instructions To Person Making Motion**

Fill out all sections of this form except the Order section and file it with the Clerk of the Court at least three (3) days before the date of the scheduled event.

Docket number

FBT-CV-15-6048103

Name of case (Full name of Plaintiff v. Full name of Defendant)

SOTO, DONNA L., ADM OF THE ESTATE OF VICTORIA L. S Et Al v. BUSHMASTER FIREARMS INTERNATIONAL, LLC AKA FREED

<input checked="" type="checkbox"/> Judicial District	<input type="checkbox"/> Housing Session	<input type="checkbox"/> Geographical Area Number	Address of Court (Number, street, town and zip code) 1061 MAIN STREET BRIDGEPORT, CT 06604
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Date of Motion Oct-28-2015	Sequence Number on Short Calendar (If applicable)	Name of Judge Who Scheduled the Event this Continuance is Requested for (If applicable)
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Date of Scheduled Event Nov-5-2015	Person Making Motion is: <input checked="" type="checkbox"/> Plaintiff's Attorney <input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant's Attorney <input type="checkbox"/> Defendant <input type="checkbox"/> Other
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Firm Name, if Applicable KOSKOFF KOSKOFF & BIEDER PC	Address 350 FAIRFIELD AVENUE BRIDGEPORT, CT 06604	Phone Number (with area code) 203-336-4421
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Event For Which Continuance Is Requested: ("X" applicable box(es) and explain below)

<input type="checkbox"/> Arbitration	<input type="checkbox"/> Early Intervention Conference	<input type="checkbox"/> Pretrial
<input type="checkbox"/> Administrative Appeal Hearing	<input type="checkbox"/> Fact-Finding	<input checked="" type="checkbox"/> Status Conference
<input type="checkbox"/> Attorney Trial Referee Proceeding	<input type="checkbox"/> Foreclosure Mediation	<input type="checkbox"/> Trial Management Conference
<input type="checkbox"/> Court Trial	<input type="checkbox"/> Jury Trial	<input type="checkbox"/> Other _____
<input type="checkbox"/> Judicial-Alternative Dispute Resolution (J-ADR)	<input type="checkbox"/> Hearing In Damages	

Reason(s) For Continuance Request: ("X" reason(s) and provide an explanation)

<input type="checkbox"/> Counsel not ready _____	<input type="checkbox"/> Discovery not complete _____
<input type="checkbox"/> Lay witness not available (Name of witness) _____	
<input checked="" type="checkbox"/> Counsel not available _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Party not available (Name of party) _____	
<input type="checkbox"/> Expert witness not available (Name of witness) _____	

Continue explanation, if necessary:

Plaintiff's counsel is not available in the morning and is requesting the Status Conference be moved to the afternoon on 11/5/15.
(see attached - further explanation)

For the above reason(s), I request this case be continued to (date): Nov-5-2015 or ☐ at the court's discretion.
See Attached

I have contacted all counsel and self-represented parties of record about my intention to seek a continuance. All of the counsel and self-represented parties:

☐ Consent ☐ Do Not Consent ☒ Have not responded to the above motion for continuance and requested continuance date.

Note: An agreement to continue a matter does not mean that the motion will automatically be granted by the court.

I agree to be responsible for notifying my client, if applicable, and all counsel of record and self-represented parties whether the continuance is granted or denied, and if granted, the new date of the scheduled event.

Certification

I certify that a copy of this document was mailed or delivered electronically or non-electronically on (date) Oct-28-2015 to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties receiving electronic delivery.

Name and address of each party and attorney that copy was mailed or delivered to*

DISERIO MARTIN OCONNOR & CASTIGLIONI - 1 ATLANTIC STREET/STAMFORD, CT 06901

Signed (Signature of filer) ▶ 410518	Print or type name of person signing JOSHUA KOSKOFF	Date signed Oct-28-2015
Mailing address (Number, street, town, state and zip code) 350 FAIRFIELD AVE 5TH FLOOR BRIDGEPORT, CT 06604		Telephone number 203-336-4421
Order	Motion For Continuance is: <input type="checkbox"/> Granted <input type="checkbox"/> Denied	Matter Continued To: Signed (Judge) Date

*If necessary, attach additional sheet or sheets with name and address which the copy was mailed or delivered to.

Continuation of JDCV21 Motion For Continuance Form for FBT-CV-15-6048103-S

Submitted By KOSKOFF KOSKOFF & BIEDER PC (032250)

Additional Information on date continuance is requested:

Plaintiff's counsel has contacted defense counsel as to their availability and has received a response from defendants Bushmaster/Remington only. No response has been received from defendant Camfour.

Continuation of JDCV21 Motion For Continuance Form for FBT-CV-15-6048103-S

Submitted By KOSKOFF KOSKOFF & BIEDER PC (032250)

Certification of Service (Continued from JDCV21)

Name and Address at which service was made:

RENZULLI LAW FIRM LLP - 81 MAIN STREET/SUITE 508/WHITE PLAINS, NY 10601

******* End of Certification of Service *******